## TRANS

## State of North Carolina

Department of Environment and Natural Resources
Division of Waste Management

## TRANSFER STATION

Facility Annual Report
For the period of July 1, 2012-June 30, 2013

According to (G.S. 130A-309.09D(b)) completed forms must be returned by August 1, 2013 and a copy of this report must be sent to the County Manager of each county from which waste was received. If you have questions or require assistance in completing this report, contact your Regional Environmental Senior Specialist.

Facility Name: Yadkin County	Permit: 9903T-transfer-1994
Facility Website (URL): yadkincountync.gov	
Physical Address	Mailing Address
Street 1: 1149 Landfill Rd	Street 1: PO Box 1298
Street 2:	Street 2:
City: Yadkinville County: Yadkin	City: Yadkinville
State: North Carolina Zip: 27055	State: North Carolina Zip: 27055
Primary Facility Contact Person	Billing Contact Person
Name: Kathie Jester	Name: Kathie Jester
Phone: (336) 679-6348 Fax: (336) 961-2605	Phone: (336) 679-6348 Fax: (336) 961-2605
Email: kjester@yadkincountync.gov	Email: kjester@yadkincountync.gov
If so, please report the date this occurred:  3. Are there SWANA or other certified operator(s) at this facility?   Yes No  If yes, indicate the following:  Name: Scott Tenant Certification type and expiration date: Transfer Station Op. Spec. 12-5-13	
Name: Certification type and	expiration date:
Name: Certification type and	expiration date:
	Aluminum Cans 5.64 tons Other Metal 49.8 tons  Computer Equipment 4 tons Televisions 25.48 tons
Shinglestons	

5. Total waste received (INCLUDING WASTE TRANSFERRED AND RECYCLED) at this facility during the period of July 1, 2012, through June 30, 2013. Indicate tonnage received by COUNTY of waste origin. Please indicate COUNTY and STATE, if received from another state. Jul Oct Nov Dec Feb Mar May June Total Aug Sept Jan Apr Received from Yadkin 2.238 2.154.9 2.318.8 2.017.2 2.310.4 2.078 2,407.7 2.435.8 2.111.2 2.108.5 2.282.5 2.225 26,688 6. Indicate the facility(s) that received your facility's non-recycled waste material: **Grand Total** 26,688 NAME, PERMIT #, and LOCATION (city, state) of FACILITY **Facility Type Tons** Foothills Regional MSW Landfill MSW Landfill 26,688 26,688.00 **TOTAL REMINDER:** According to (G.S. 130A-309.09D(b)), this Please return your completed report to: report must be sent to the <u>Regional Environmental Senior</u> C.T. Gerstell Specialist for your area and a copy of this report must be 610 East Center Avenue sent to the County Manager of each county from which Mooresville, NC 28115 waste was received. phone: 704.235.2144 email: Charles.Gerstell@ncdenr.gov CERTIFICATION: I certify that the information provided is an accurate representation of the activity at this facility. Signature: Date: Name: Gary Hayes Title: Inspection & Environmental Serivices Director Phone Number: (336) 679-4233 Email: ghayes@yadkincountync.gov Transfer2013 9903T-transfer-1994